



State of New Jersey

DEPARTMENT OF HEALTH AND SENIOR SERVICES

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BULLETIN

OMC 2003-03

TO: All Health Maintenance Organizations Doing Business in New Jersey, and all Insurers, Health Service Corporations, Medical Service Corporations, and Hospital Service Corporations offering Health Benefits Plans that are Managed Care Plans

FROM: Marilyn Dahl, Senior Assistant Commissioner, New Jersey State Department of Health and Senior Services

DATE: October 1, 2003

RE: Notice required pursuant to N.J.S.A. 26:2S-5a(6) regarding the Managed Health Care Consumer Assistance Program

In January of 2001, the law creating the Managed Health Care Consumer Assistance Program ("MHCCAP") was enacted. Among other things, the law requires that carriers provide notice to consumers about the existence of the program, in accordance with N.J.S.A. 26:2S-5.

The Department of Health and Senior Services ("Department") previously issued OMC Bulletin 2001-03 explaining the purpose of the MHCCAP, and general guidelines for carriers to follow in complying with the notice requirement, including referral to two outside organizations that operated the program on an interim basis by law. Among other things, these organizations established a telephone number and a dedicated Internet site for the MHCCAP.

Carriers are now being advised that compliance with the notice requirement is being waived by the Department until further notice. The additional funding originally appropriated for the MHCCAP has lapsed, and new appropriations for the MHCCAP have not been made. Accordingly, the functions of the MHCCAP are now being performed by the Department with existing staff.

Carriers need not provide written notice to covered persons regarding the current status of the MHCCAP, and should cease distributing any written notices referring covered persons to the external Internet site or the Department's former vendors for the MHCCAP. In addition, carriers should advise those covered persons who inquire about the MHCCAP and its status that the MHCCAP's functions are being handled by the Department. Carriers should advise covered persons of the telephone hotline for the Office of Managed Care, which is 888-393-1062. Carriers should continue to provide written and verbal notice to covered persons of the right for covered persons to contact the Department (or the Department of Banking and Insurance, or the Department of Human Services, as appropriate) whenever the covered person is not satisfied with the carrier's resolution of the complaint or appeal.